

**Anderson County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Anderson County Street Address 1160 By Pass North City, State Zip Lawrenceburg KY 40342	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Ashland Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Ashland Independent Street Address PO Box 3000 City, State Zip Ashland KY 41101	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Augusta IndependentKentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Augusta Independent Street Address 307 Bracken St City, State Zip Augusta KY 41002		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$24,250.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Ballard County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Ballard County Street Address 3465 Paducah Rd City, State Zip Barlow KY 42024	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Barren County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Barren County Street Address 202 W Washington St City, State Zip Glasgow KY 42141	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$291,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Bell County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Bell County Street Address PO Box 340 City, State Zip Pineville KY 40977	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$194,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Berea Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Berea Independent Street Address 3 Pirate Pkwy City, State Zip Berea KY 40403	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Bourbon County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Bourbon County Street Address 3343 Lexington Rd City, State Zip Paris KY 40361	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00	11 Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013	
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions:	
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services	Date: August 23, 2012

**Bowling Green Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Bowling Green Independent Street Address 1211 Center St City, State Zip Bowling Green KY 42101	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Boyd County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Boyd County Street Address 1104 Bob McCullough Dr City, State Zip Ashland KY 41102	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Boyle CountyKentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Boyle County Street Address 352 N Danville By Pass City, State Zip Danville KY 40422		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
	2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
	4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:	
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Breathitt County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Breathitt County Street Address PO Box 750 City, State Zip Jackson KY 41339	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Bullitt County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Bullitt County Street Address 1040 Hwy 44 E City, State Zip Shepherdsville KY 40165	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$485,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Burgin Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Burgin Independent Street Address PO Box B City, State Zip Burgin KY 40310	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Calloway County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Calloway County Street Address PO Box 800 City, State Zip Murray KY 42071	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Campbell CountyKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Campbell County Street Address 101 Orchard Ln City, State Zip Alexandria KY 41001		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$242,500.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Campbellsville Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Campbellsville Independent Street Address 136 S Columbia City, State Zip Campbellsville KY 42718	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11 Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013	
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions:	
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services	Date: August 23, 2012

Carroll CountyKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Carroll County Street Address 813 Hawkins Street City, State Zip Carrollton KY 41008		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Carlisle County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Carlisle County Street Address 4557 State Rt 1377 City, State Zip Bardwell KY 42023	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Carter County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Carter County Street Address 228 S Carol Malone Blvd City, State Zip Grayson KY 41143	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$291,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Casey County Kentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Casey County Street Address 1922 N US 127 City, State Zip Liberty KY 42539		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
	2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
9			Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters	
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): KRS 158.792	11	Evaluations:	
5	Award Amount: \$48,500.00			
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Christian County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Christian County Street Address PO Box 609 City, State Zip Hopkinsville KY 42241	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$436,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Clay County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Clay County Street Address 128 Richmond Rd City, State Zip Manchester KY 40962	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$291,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Covington IndependentKentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Covington Independent Street Address 25 E Seventh St City, State Zip Covington KY 41011		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP- Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Crittenden County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Crittenden County Street Address PO Box 362 City, State Zip Marion KY 42064	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services Date: August 23, 2012		

Cumberland CountyKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Cumberland County Street Address PO Box 420 City, State Zip Burkesville KY 42717		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
	2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
	4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:	
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

Danville IndependentKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Danville Independent Street Address 152 E Martin Luther King Blvd City, State Zip Danville KY 40422		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
	2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
	4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:	
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Daviess County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Daviess County Street Address PO Box 21510 City, State Zip Owensboro KY 42304	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$388,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Elizabethtown Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Elizabethtown Independent Street Address 219 Helm St City, State Zip Elizabethtown KY 42701	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11 Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013	
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions:	
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services	Date: August 23, 2012

**Elliott County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Elliott County Street Address PO Box 767 City, State Zip Sandy Hook KY 41171	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11 Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013	
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions:	
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services	Date: August 23, 2012

**Eminence Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Eminence Independent Street Address PO Box 146 City, State Zip Eminence KY 40019	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Estill County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Estill County Street Address PO Box 930 City, State Zip Irvine KY 40336	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Fairview IndependentKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Fairview Independent Street Address 2201 Main Street City, State Zip Ashland KY 41102		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
	2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
	4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:	
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services	Date: August 23, 2012		

**Fayette County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Fayette County Street Address 701 E Main St City, State Zip Lexington KY 40502	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$970,000.00	11 Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013	
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions:	
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services	Date: August 23, 2012

**Fleming County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Fleming County Street Address 211 W Water St City, State Zip Flemingsburg KY 41041	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11 Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013	
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions:	Date: August 23, 2012
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services	

Floyd CountyKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Floyd County Street Address 106 N Front Ave City, State Zip Prestonsburg KY 41653		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP- Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$242,500.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Franklin County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Franklin County Street Address 916 E Main St City, State Zip Frankfort KY 40601	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$291,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Fulton Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Fulton Independent Street Address 304 West State Line City, State Zip Fulton KY 42041	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Graves County Kentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Graves County Street Address 2290 State Rt 121 N City, State Zip Mayfield KY 42066		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
	2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
	4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:	
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Grayson County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Grayson County Street Address PO Box 4009 City, State Zip Leitchfield KY 42754	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Green CountyKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Green County Street Address PO Box 369 City, State Zip Greensburg KY 42743		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

Hancock CountyKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Hancock County Street Address 83 State Rt 271 N City, State Zip Hawesville KY 42348		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Harlan County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Harlan County Street Address 251 Ball Park Rd City, State Zip Harlan KY 40831	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$291,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Harlan Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Harlan Independent Street Address 420 E Central St City, State Zip Harlan KY 40831	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Hazard Independent Kentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Hazard Independent Street Address 705 Main Street City, State Zip Hazard KY 41701		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
	2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
	4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:	
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Henderson County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Henderson County Street Address 1805 Second St City, State Zip Henderson KY 42420	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Jackson IndependentKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Jackson Independent Street Address 940 Highland Ave City, State Zip Jackson KY 41339		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
	2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
	4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:	
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Jefferson County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Jefferson County Street Address PO Box 34020 City, State Zip Louisville KY 40232	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$1,358,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Jessamine CountyKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Jessamine County Street Address 871 Wilmore Rd City, State Zip Nicholasville KY 40356		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Johnson County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Johnson County Street Address 253 N Mayo Tr City, State Zip Paintsville KY 41240	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$242,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Kenton County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Kenton County Street Address 1055 Eaton Dr City, State Zip Fort Wright KY 41017	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$339,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Knott County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Knott County Street Address PO Box 869 City, State Zip Hindman KY 41822	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$291,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Knox County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Knox County Street Address 200 Daniel Boone Dr City, State Zip Barbourville KY 40906	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$242,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**LaRue County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name LaRue County Street Address 208 College St City, State Zip Hodgenville KY 42748	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Laurel County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Laurel County Street Address 718 North Main Street City, State Zip London KY 40744	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Lawrence County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Lawrence County Street Address PO Box 607 City, State Zip Louisa KY 41230	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services Date: August 23, 2012		

**Lee County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Lee County Street Address PO Box 668 City, State Zip Beattyville KY 41311	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Leslie County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Leslie County Street Address PO Box 949 City, State Zip Hyden KY 41749	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$194,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Letcher County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Letcher County Street Address 224 Park St City, State Zip Whitesburg KY 41858	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$194,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Lincoln County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Lincoln County Street Address PO Box 265 City, State Zip Stanford KY 40484	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Livingston County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Livingston County Street Address PO Box 219 City, State Zip Smithland KY 42081	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Logan County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Logan County Street Address PO Box 417 City, State Zip Russellville KY 42276	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$194,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:	14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services Date: August 23, 2012

**Lyon County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Lyon County Street Address 217 Jenkins Rd City, State Zip Eddyville KY 42038	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Madison County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Madison County Street Address PO Box 768 City, State Zip Richmond KY 40475	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$485,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Marion County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Marion County Street Address 755 E Main St City, State Zip Lebanon KY 40033	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Marshall County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Marshall County Street Address 86 High School Rd City, State Zip Benton KY 42025	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Martin County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Martin County Street Address PO Box 366 City, State Zip Inez KY 41224	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Mason CountyKentucky Department of Education

Award Notification

1	Name and Address of Recipient: Agency Name Mason County Street Address PO Box 130 City, State Zip Maysville KY 41056		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

McCracken CountyKentucky Department of Education

Award Notification

1	Name and Address of Recipient: Agency Name McCracken County Street Address 435 Berger Rd City, State Zip Paducah KY 42001		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$194,000.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**McLean County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name McLean County Street Address PO Box 245 City, State Zip Calhoun KY 42327	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Meade County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Meade County Street Address PO Box 337 City, State Zip Brandenburg KY 40108	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11 Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013	
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions:	
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services	Date: August 23, 2012

**Menifee County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Menifee County Street Address PO Box 110 City, State Zip Frenchburg KY 40322	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Metcalfe County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Metcalfe County Street Address 1007 W Stockton City, State Zip Edmonton KY 42129	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Middlesboro Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Middlesboro Independent Street Address PO Box 959 City, State Zip Middlesboro KY 40965	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Monroe County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Monroe County Street Address 309 Emberton St City, State Zip Tompkinsville KY 42167	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Montgomery County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Montgomery County Street Address 700 Woodford Drive City, State Zip Mount Sterling KY 40353	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Muhlenberg County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Muhlenberg County Street Address 510 West Main Street City, State Zip Powderly KY 42367	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Murray Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Murray Independent Street Address 208 S 13th St City, State Zip Murray KY 42071	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Nelson County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Nelson County Street Address PO Box 2277 City, State Zip Bardstown KY 40004	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$242,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Newport Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Newport Independent Street Address 301 E Eighth St City, State Zip Newport KY 41071	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Owensboro Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Owensboro Independent Street Address PO Box 249 City, State Zip Owensboro KY 42302	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$242,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Paintsville Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Paintsville Independent Street Address 305 2nd St City, State Zip Paintsville KY 41240	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Paris Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Paris Independent Street Address 310 W Seventh St City, State Zip Paris KY 40361	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Pendleton County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Pendleton County Street Address 2525 Hwy 27 N City, State Zip Falmouth KY 41040	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Perry CountyKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Perry County Street Address 315 Park Ave City, State Zip Hazard KY 41701	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**PikeKentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Pike County Street Address 316 S. Mayo Tail City, State Zip Pikeville KY 41501	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$291,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Pikeville Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Pikeville Independent Street Address 148 Second Street City, State Zip Pikeville KY 41501	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Pineville IndependentKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Pineville Independent Street Address 401 Virginia Ave City, State Zip Pineville KY 40977		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
	2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
	4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:	
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Pulaski County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Pulaski County Street Address PO Box 1055 City, State Zip Somerset KY 42502	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$291,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Russell Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Russell Independent Street Address 409 Belfont St City, State Zip Russell KY 41169	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Shelby CountyKentucky Department of Education

Award Notification

1	Name and Address of Recipient: Agency Name Shelby County Street Address 1155 Main St.,PO Box 159 City, State Zip Shelbyville KY 40066		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$242,500.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Somerset Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Somerset Independent Street Address 305 N College St City, State Zip Somerset KY 42502	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services Date: August 23, 2012		

Spencer CountyKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Spencer County Street Address 207 W Main St City, State Zip Taylorsville KY 40071		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Taylor County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Taylor County Street Address 1209 E Broadway City, State Zip Campbellsville KY 42718	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

Todd CountyKentucky Department of Education Award Notification

1	Name and Address of Recipient: Agency Name Todd County Street Address 205 Airport Road City, State Zip Elkton KY 42220		7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601		8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A		9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00		11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012	

**Trimble County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Trimble County Street Address PO Box 275 City, State Zip Bedford KY 40006	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Walton-Verona Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Walton-Verona Independent Street Address 16 School Rd City, State Zip Walton KY 41094	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Washington County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Washington County Street Address 120 Mackville Hill Rd City, State Zip Springfield KY 40069	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Whitley County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Whitley County Street Address 116 N 4th St City, State Zip Williamsburg KY 40769	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$291,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Williamsburg Independent Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Williamsburg Independent Street Address 1000 Main St City, State Zip Williamsburg KY 40769	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$48,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services Date: August 23, 2012		

**Wolfe County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Wolfe County Street Address PO Box 160 City, State Zip Campton KY 41301	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$97,000.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services		Date: August 23, 2012

**Woodford County Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Woodford County Street Address 330 Pispah Pk City, State Zip Versailles KY 40383	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Phone # Judith Halasek – 502-564-4970 Street Address 500 Mero Street-19 th Floor Budget Contact – Phone # Kristin Burton – 502-564-1979 Street Address 500 Mero Street – 16 th Floor City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Read to Achieve Fund Source General Funds CFDA# N/A MUNIS Project Number 1823 Master Agreement Number N/A	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 1 st and 3 rd Quarters
4	Grant Authority (Source): KRS 158.792	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP-Quarterly <input type="checkbox"/> Other _____
5	Award Amount: \$145,500.00	11	Evaluations:
6	Period of Award: July 1, 2012-June 30, 2013		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Johnny Collett, Director Division of Learning Services Date: August 23, 2012		